ACE and CCE Utilization Report Instructions

Each plan must submit a Utilization Report (UR) to HFS on the 15th State Business Day of the month. This report should be uploaded to the Sharepoint/FTP website.

Instructions on how to fill out the UR are as follows:

Step 1: Fill out all Common Fields

The UR is an excel spreadsheet comprised of 3 separate tabs.
- Tab 1 – ER Visits
- Tab 2 – General Inpatient Admissions and Inpatient Days
- Tab 3 – Psych (Behavioral Health) Inpatient Admission and Inpatient Days

Please make sure each field listed below is filled out on each tab.

Report Name (name of the month you are reporting – this should follow the Naming Convention as "Year"-"2 digit month"_UR_"3 digit ACE/CCE code" for EX: the November report for Advocate would be: 2014-11_UR_AAC)

Reporting Month's Beginning Enrollment (number of members enrolled as of the 1st of the month you are reporting)

Next Month's Beginning Enrollment (this approximates the number of members enrolled as of the end of the month you are reporting)

Average Enrollment (this will be auto calculated for you)

Step 2: Fill out each Tab within the Spreadsheet

Tab 1 – ER Visits

Using the Next Month's Beginning Enrollment Panel Roster, identify the number of members enrolled as of the end of the month that submitted claims under Category of Service codes 0450 – 0459 and 0680 – 0689. Insert this figure into the "Visits" field. The figure for the "Per Thousand" field will be auto calculated for you.

Tab 2 – General Inpatient Admission and Inpatient Days

Using the Next Month's Beginning Enrollment Panel Roster, identify the number of members enrolled as of the end of the month that submitted claims under Category of Service code 020. Insert this figure into the "Admits" and "Days" fields. The figure for the "Per Thousand" field will be auto calculated for you. You must do this for In-Network and Out-of-Network Inpatient Admissions, as well as In-Network and Out-of-Network Inpatient Days. The figures for the "Total" and "Average Length of Stay" fields will be auto calculated.

Tab 3 – Psych (Behavioral Health) Inpatient Admission and Inpatient Days

Using the Next Month's Beginning Enrollment Panel Roster, identify the number of members enrolled as of the end of the month that submitted claims under Category of Service code 021. Insert this figure into the "Admits" and "Days" field. The figure for the "Per Thousand" field will be auto calculated for you. You must do this for In-Network and Out-of-Network Inpatient Admissions, as well as In-Network and Out-of-Network Inpatient Days. The figures for the "Total" and "Average Length of Stay" fields will be auto calculated.

Auto Calculated Field Methodology

Average Enrollment: this field was auto calculated by adding the Reporting Month's Beginning Enrollment numbers and the Next Month's Beginning Enrollment numbers then dividing the sum by 2.

Per Thousand: this field was auto calculated by dividing the number of Days member claims were reported by the Reporting Month's Beginning Enrollment numbers, then multiplying the sum by 12,000.

Total Days: this field was auto calculated by adding the number of In-Network Days and Out-of-Network Days together.

Total Per Thousand: this field was auto calculated by adding the number of In-Network Per Thousand and the Out-of-Network Per Thousand together.

Average Length of Stay (ALOS) In-Network/Out-of-Network Days: this field was auto calculated by taking the number of Inpatient Days In-Network/Out-of-Network Days and dividing it by the number of Inpatient Admissions In-Network/Out-of-Network Days.

Average Length of Stay (ALOS) In-Network/Out-of-Network Per Thousand: this field was auto calculated by taking the number of Inpatient Days In-Network/Out-of-Network Per Thousand figure and dividing it by the number of Inpatient Admissions In-Network/Out-of-Network Per Thousand figure.

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